


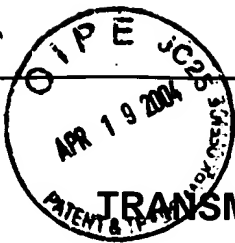
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Ref #
1638

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	09/813,352
	Filing Date	21 March 2001
	First Named Inventor	Luis Lopez-MOLINA
	Group Art Unit	1638
	Examiner Name	Cynthia E. Collins
	Attorney Docket Number	2312-109
This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.		

1. Submission required under 37 C.F.R. § 1.114 Note: if the RCE is proper, any previously filed unentered amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).
 - a. ☒ Previously submitted
 - i. ☒ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on March 17, 2004
 - ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
 - iii. ☐ Other _____
 - b. Enclosed
 - i. ☐ Amendment/Reply
 - ii. ☐ Affidavit(s)/Declarations
 - iii. ☐ Information Disclosure Statement (IDS)
 - iv. ☐ Other _____
2. Miscellaneous
 - a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.170(i) required.)
 - b. ☐ Other _____
3. Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.
 - a. ☐ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 02-2135.
 - i. ☒ RCE fee required under 37 C.F. R. § 1.17(e)
 - ii. ☒ Extension of time fee (37 C.F.R. §§ 1.136 and 1.17)
 - iii. ☐ Other _____
 - b. ☒ Check in the amount of \$440.00 _____ enclosed.
 - c. ☐ Payment by credit card (Form PTO-2038 enclosed.)

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED			
NAME AND REG. NUMBER	Jeffrey L. Ihnen, Reg. No. 28,957		
SIGNATURE		DATE	Monday April 19, 2004

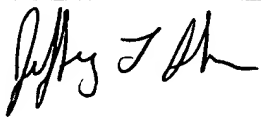
**TRANSMITTAL FORM***(to be used for all correspondence after initial filing)**Complete if Known.*

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Filing Date	21 March 2001
First Named Inventor	Luis Lopez-MOLINA
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Total Number of Pages in This Submission 3**ENCLOSURES (check all that apply)**

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input checked="" type="checkbox"/> Request for Continued Examination | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

REMARKS:

SUBMITTED BY		Complete (if applicable)			
NAME AND REG. NUMBER	Jeffrey L. Ihnen, Reg. No. 28,957				
SIGNATURE		DATE	Monday April 19, 2004	DEPOSIT ACCOUNT USER ID	